

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 6  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Arrowhead Graphics, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 15 / 2014		
Mailing Address 508 Houston St			Amount <span style="border: 1px solid black; padding: 2px;">8250.00</span>		
City Greensboro	State NC	Zip Code 27401	Transaction ID : SE.4134		
Purpose of Expenditure IE-McConnell-Yard Signs		Category/ Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 04 / 2014		
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8498.81</span>			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Arrowhead Graphics, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 15 / 2014		
Mailing Address 508 Houston St			Amount <span style="border: 1px solid black; padding: 2px;">1125.00</span>		
City Greensboro	State NC	Zip Code 27401	Transaction ID : SE.4135		
Purpose of Expenditure IE-McConnell-Yard Signs		Category/ Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 05 / 2014		
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9623.81</span>			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">9375.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 02 / 16 / 2014

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Embassy Partnership</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 14 / 2014</div> </div>	
Mailing Address 4010 Dupont Circle Ste. 700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2025.00</div>	
City State Zip Code Louisville KY 40207	<b>Transaction ID : SE.4136</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 14 / 2014</div> </div>		
Purpose of Expenditure IE-McConnell-Office Rent	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MITCH MCCONNELL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">30450.81</div>		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 16 / 2014</div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">229.89</div>	
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.4137</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 16 / 2014</div> </div>		
Purpose of Expenditure IE-McConnell-Travel	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">002</div>	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MITCH MCCONNELL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">229.89</div>		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2254.89</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*
*[Electronically Filed]*

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02 / 16 / 2014

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 17 / 2014</b>		
Mailing Address <b>400 N Capitol St., NW Suite 735</b>			Amount <b>18.92</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.4138</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/ Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 17 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>248.81</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 13 / 2014</b>		
Mailing Address <b>400 N Capitol St., NW Suite 735</b>			Amount <b>284.45</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.4139</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/ Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 13 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>23750.26</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>303.37</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

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**02 / 16 / 2014**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 4 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 14 / 2014</b>		
Mailing Address <b>400 N Capitol St., NW Suite 735</b>			Amount <b>234.34</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.4140</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/ Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 14 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>30685.15</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 15 / 2014</b>		
Mailing Address <b>400 N Capitol St., NW Suite 735</b>			Amount <b>2312.20</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.4141</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/ Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 15 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>32997.35</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>2546.54</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 5 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>JW, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 14 / 2014</b>	
Mailing Address <b>771 Corporate Drive Suite 300</b>		Amount <b>2831.67</b>	
City <b>Lexington</b>	State <b>KY</b>	Zip Code <b>40503</b>	Transaction ID : <b>SE.4142</b>
Purpose of Expenditure <b>IE-McConnell-Office Rent</b>		Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 14 / 2014</b>
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>
Calendar Year-To-Date Per Election for Office Sought <b>26581.93</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>JW, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 14 / 2014</b>	
Mailing Address <b>771 Corporate Drive Suite 300</b>		Amount <b>1843.88</b>	
City <b>Lexington</b>	State <b>KY</b>	Zip Code <b>40503</b>	Transaction ID : <b>SE.4143</b>
Purpose of Expenditure <b>IE-McConnell-Office Rent</b>		Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 14 / 2014</b>
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>
Calendar Year-To-Date Per Election for Office Sought <b>28425.81</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>4675.55</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker**[Electronically Filed]*

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**02 / 16 / 2014**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <b>Mungo, LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 625 Clay St E		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Monmouth	State OR	Zip Code 97361	Amount 12000.00
Purpose of Expenditure IE-Bevin-Yard Signs	Category/ Type 004	Transaction ID : SE.4144 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: KY <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Mungo, LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 625 Clay St E		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Monmouth	State OR	Zip Code 97361	Amount 1842.00
Purpose of Expenditure IE-Bevin-Yard Signs	Category/ Type 004	Transaction ID : SE.4145 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: KY <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	13842.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	32997.35

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

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Signature